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C 2079 PCT/US

DECLARATION

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I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365C of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/EP00/08960	09/14/2000	

Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

<input type="checkbox"/> Firm Name	<input type="checkbox"/> Customer Number or label		
OR			
<input checked="" type="checkbox"/> List Attorney(s) and/or agent(s) name and registration number below:			
Name	Registration Number	Name	Registration Number
John E. Drach	<u>32,891</u>	Steven J. Trzaska	<u>36,296</u>
Aaron R. Ettelman	<u>42,516</u>	Henry E. Millson, Jr.	<u>18,980</u>

Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or label	<u>23657</u>	OR	<input type="checkbox"/> Fill in correspondence address below
Name					
Address					
Address					
City	State	Zip			
Country	Telephone	610-278-4929	Fax	610-278-4971	

hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name	<u>Karl Heinz</u>	Middle Initial		Family Name	<u>SCHMID</u>	Suffix e.g. Jr.	
Inventor's Signature	<u>Karl Heinz Schmid</u>				Date	<u>2002-03-12</u>	
Residence: City	<u>Mettmann</u>	State	<u>DEX</u>	Country	<u>Germany</u>	Citizenship	<u>German</u>
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Post Office Address							
City	<u>40822 Mettmann</u>	State	<u>Zip</u>	Country	<u>Germany</u>	Applicant Authority	
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto							

Type a plus sign (+) inside this box → **DECLARATION****ADDITIONAL INVENTOR(S)**
Supplemental Sheet

Name of Additional Joint Inventor, if any:

 A petition has been filed for this unsigned inventor

Given Name	<u>Bernd</u>	Middle Initial		Family Name	<u>FABRY</u>	Suffix e.g. Jr.			
Inventor's Signature	<u>Bernd Fabry</u>				Date	2002-03-12			
Residence: City	<u>Korschenbroich</u>	State	<u>DEK</u>	Country	<u>Germany</u>	Citizenship	<u>German</u>		
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Name of Additional Joint Inventor, if any:

 A petition has been filed for this unsigned inventor

Given Name	<u>Alfred</u>	Middle Initial		Family Name	<u>WESTFECHTEL</u>	Suffix e.g. Jr.			
Inventor's Signature	<u>Alfred Westfechtel</u>				Date	2002-03-12			
Residence: City	<u>Hilden</u>	State	<u>DEK</u>	Country	<u>Germany</u>	Citizenship	<u>German</u>		
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City	<u>40724 Hilden</u>	State		Zip		Country	<u>Germany</u>	Applicant Authority	

Name of Additional Joint Inventor, if any:

 A petition has been filed for this unsigned inventor

Given Name			Middle Initial		Family Name			Suffix e.g. Jr.	
Inventor's Signature					Date				
Residence: City			State		Country			Citizenship	
Post Office Address									
Post Office Address									
City			State		Zip		Country	Applicant Authority	

Name of Additional Joint Inventor, if any:

 A petition has been filed for this unsigned inventor

Given Name			Middle Initial		Family Name			Suffix e.g. Jr.	
Inventor's Signature					Date				
Residence: City			State		Country			Citizenship	
Post Office Address									
Post Office Address									
City			State		Zip		Country	Applicant Authority	

 Additional inventors are being named on supplemental sheet(s) attached hereto